

U.S. Fish and Wildlife Service

Exception to Service Policy Request Form

Date: _____ Requesting Organization: _____

Regional/Program Contact: _____ Contact Phone: _____

Signature: _____

Cooperator Name: _____

Cost Structure(s): _____

Total Agreement Amount: _____

Total Exemptions (see Cost Study): _____

Project Description: _____

Archive Only - See FWS 3-2208

Exception Justification: _____

REGIONAL APPROVAL:

(Not required for Washington Office requests)

Program ARD

Date

ARD/Budget & Administration

Date

Regional Director

Date

Exception to Service Policy Cost Study

1. Total Direct Costs

\$ _____

Indirect Costs (Contact the Division of Finance for Assistance)

Office Space	\$ _____
Telephone	_____
Postage	_____
Printing	_____
Accounting System	_____
Payroll/Personnel System	_____
Procurement System	_____
Worker's Compensation	_____
Unemployment	_____
Regional Program Support	_____
Headquarters' Program Support	_____
Regional Administration	_____
Headquarters' Administration	_____

2. Total Indirect Costs

\$ _____

Proposed Exemptions

_____	\$ _____
_____	_____
_____	_____
_____	_____

3. Total Exemptions

(\$ _____)

4. Adjusted Indirect Costs (Line 2 minus Line 3)

\$ _____

**Full Cost
Recovery Rate**
(Line 2 divided by Line 1)

_____ %

**Proposed Cost
Recovery Rate**
(Line 4 divided by Line 1)

_____ %

Exception to Policy Approved: YES or _____

Applicable Rate: _____ %

Approval/Disapproval Justification:

WASHINGTON APPROVAL:

Chief, Division of Finance	Date
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Chief, Division of Budget	Date
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Assistant Director - Budget, Planning & Human Resources

Date

Assistant Director - Business Management & Operations

Date

Assistant Director - Programmatic

Date

Director, U.S. Fish and Wildlife Service

Date